05/02/2014 09:40

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) WOMEN LEAD PAC	FEC IDENTIFICATION NUMBER ▼
WOMEN LEAD I AO	C C00548545
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee LN Consulting LLC	Date of Public Distribution/Dissemination
<u> </u>	05 01 2014
Mailing Address 121 State St.	Amount
City State Zip Code	11788.43
Harrisburg PA 17101	Transaction ID : SE.4162 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Production and Postage  Category/ Type	M 05
Name of Federal Candidate Support Office	e Sought: X House District: 02
CHARLOTTE R LANE Oppose	President Senate State: WV
Calendar Year-To-Date Per Election for Office Sought  Disbut	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	11788.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	11788.43
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
2 410	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	